

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

L PAC

ADDRESS (number and street)

601 13TH STREET NW SUITE 730N

☐ Check if different than previously reported. (ACC)

WASHINGTON

DC

20005

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00519413

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☒April 15
Quarterly Report (Q1)☐July 15
Quarterly Report (Q2)☐October 15
Quarterly Report (Q3)☐January 31
Year-End Report (YE)☐July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer SARAH SCHMIDT

Signature of Treasurer

SARAH SCHMIDT

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

L PAC

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2014 To: M M / D D / Y Y Y Y 03 / 31 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y 2014		63712.25
(b) Cash on Hand at Beginning of Reporting Period.....	63712.25	
(c) Total Receipts (from Line 19)	324417.58	324417.58
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	388129.83	388129.83
7. Total Disbursements (from Line 31)	71330.85	71330.85
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	316798.98	316798.98
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

L PAC

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 01 / 01 / 2014

To:

 M M / D D / Y Y Y Y Y
 03 / 31 / 2014
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

6500.00

6500.00

(ii) Unitemized

39.58

39.58

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

6539.58

6539.58

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

6539.58

6539.58

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

317878.00

317878.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

324417.58

324417.58

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)..... ▶

324417.58

324417.58

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	71330.85	71330.85
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	71330.85	71330.85
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	71330.85	71330.85

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	6539.58	6539.58
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6539.58	6539.58
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	0.00	0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 20

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

L PAC

Full Name (Last, First, Middle Initial)

A. James Hormel

Mailing Address 19 Sutter Street

City State Zip Code
 San Francisco CA 94104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Equidex Inc

Occupation

Investment Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 02 / 19 / 2014

Transaction ID : SA11Al.7356

Amount of Each Receipt this Period

4500.00

Contribution

Full Name (Last, First, Middle Initial)

B. Ellen M. Poss

Mailing Address 450 Warren Street

City State Zip Code
 Brookline MA 02445

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 01 / 23 / 2014

Transaction ID : SA11Al.7365

Amount of Each Receipt this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6500.00

6500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 20

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

L PAC

Full Name (Last, First, Middle Initial)

A. Martha R. Davis

Mailing Address P. O. Box #30220

City

Ft. Lauderdale

State

FL

Zip Code

33303

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Artist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

01 / **23** / **2014**

Transaction ID : SA17.7374

Amount of Each Receipt this Period

10000.00

Contribution to IE Only Account

Full Name (Last, First, Middle Initial)

B. Martha R. Davis

Mailing Address P. O. Box #30220

City

Ft. Lauderdale

State

FL

Zip Code

33303

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Artist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

01 / **23** / **2014**

Transaction ID : SA17.7375

Amount of Each Receipt this Period

10000.00

Contribution to IE Only Account

Full Name (Last, First, Middle Initial)

C. Gretchen Hoover

Mailing Address P.O. Box 1087

City

Rhineland

State

WI

Zip Code

54501

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

01 / **06** / **2014**

Transaction ID : SA17.7324

Amount of Each Receipt this Period

2500.00

Contribution for IE Only Account

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

22500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 20

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

L PAC

Full Name (Last, First, Middle Initial)

A. Gretchen Hoover

Mailing Address P.O. Box 1087

City State Zip Code
 Rhinelander WI 54501

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

01 / 31 / 2014

Transaction ID : SA17.7325

Amount of Each Receipt this Period

2500.00

Contribution for IE Only Account

Full Name (Last, First, Middle Initial)

B. Linda Ketner

Mailing Address 12 Church Street

City State Zip Code
 Charleston SC 29401-2744

FEC ID number of contributing
federal political committee.

C

Name of Employer

KSI Lead. and Management Dev.

Occupation

Management Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

01 / 15 / 2014

Transaction ID : SA17.7329

Amount of Each Receipt this Period

10000.00

Contribution for IE Only Account

Full Name (Last, First, Middle Initial)

C. James Madigan

Mailing Address 855 W Ainslie Street #2

City State Zip Code
 Chicago IL 60640

FEC ID number of contributing
federal political committee.

C

Name of Employer

Greenberg Traurig, LLP

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

02 / 11 / 2014

Transaction ID : SA17.7361

Amount of Each Receipt this Period

500.00

Contribution to IE Only Account

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

13000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 20

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

L PAC

Full Name (Last, First, Middle Initial)

A. Noemi Masliah

Mailing Address 16 West 16th Street #9SN

City State Zip Code
 New York NY 10011

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Masliah & Soloway, PC

Occupation
 Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 04 2014

Transaction ID : SA17.7331

Amount of Each Receipt this Period

250.00

Contribution to IE Only Account

Full Name (Last, First, Middle Initial)

B. Laura Ricketts

Mailing Address 1615 West Rosehill Drive

City State Zip Code
 Chicago IL 60660

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Self

Occupation
 Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 02 05 2014

Transaction ID : SA17.7332

Amount of Each Receipt this Period

200000.00

Contribution to IE Only Account

Full Name (Last, First, Middle Initial)

C. Alix Ritchie

Mailing Address PO Box 30220

City State Zip Code
 Fort Lauderdale FL 33303

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Self

Occupation
 Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 01 23 2014

Transaction ID : SA17.7333

Amount of Each Receipt this Period

50000.00

Contribution to IE Only Account

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 20

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

L PAC

Full Name (Last, First, Middle Initial)

A. Dorothy Sander

Mailing Address 2500 E. Las Olas Blvd.

City State Zip Code
 FT. Lauderdale FL 33301

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 11 / 2014

Transaction ID : SA17.7369

Amount of Each Receipt this Period

100.00

Contribution to IE Only Account

Full Name (Last, First, Middle Initial)

B. SARAH SCHMIDT

Mailing Address 845 Michigan ave

City State Zip Code
 Wilmette IL 60091

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

03 / 13 / 2014

Transaction ID : SA17.7334

Amount of Each Receipt this Period

25000.00

Contribution to IE Only Account

Full Name (Last, First, Middle Initial)

C. Mark Sexton

Mailing Address 622 Greenwich Street, 2C

City State Zip Code
 New York NY 10014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Revlon

Lawyer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

02 / 02 / 2014

Transaction ID : SA17.7371

Amount of Each Receipt this Period

1000.00

Contribution to IE Only Account

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

26100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 20

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

L PAC

Full Name (Last, First, Middle Initial)

A. Urvashi Vaid

Mailing Address 230 West End Ave
#10C

City State Zip Code
New York NY 10023

FEC ID number of contributing
federal political committee.

C

Name of Employer

Columbia Law School

Occupation

Attorney/Scholar

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

01 / 16 / 2014

Transaction ID : SA17.7335

Amount of Each Receipt this Period

2500.00

Contribution to IE Only Account

Full Name (Last, First, Middle Initial)

B. Urvashi Vaid

Mailing Address 230 West End Ave
#10C

City State Zip Code
New York NY 10023

FEC ID number of contributing
federal political committee.

C

Name of Employer

Columbia Law School

Occupation

Attorney/Scholar

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

03 / 29 / 2014

Transaction ID : SA17.7378

Amount of Each Receipt this Period

2500.00

Contribution to IE Only Account

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5000.00

316850.00

	21b		22		23		24		25		26
	27		28a		28b		28c		X 29		30b

L PAC

A. BANK OF AMERICA

Date of Disbursement

Transaction ID : SB29.7298

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

15.00

B. BANK OF AMERICA

Date of Disbursement

M M / D D / Y Y Y Y
02 12 2014

Transaction ID : SB29.7299

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

25.00

C. BANK OF AMERICA

Date of Disbursement

M M / D D / Y Y Y Y

03 03 2014

Transaction ID : SB29.7300

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

232.97

SUBTOTAL of Disbursements This Page (optional).....

272.97

TOTAL This Period (last page this line number only).....

	21b		22		23		24		25		26
	27		28a		28b		28c		X 29		30b

L PAC

A. BANK OF AMERICA

Date of Disbursement

Transaction ID : SB29.7301

Amount of Each Disbursement this Period

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

B. BANK OF AMERICA

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB29.7302

Amount of Each Disbursement this Period

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

C. BANK OF AMERICA

Date of Disbursement

Transaction ID : SB29.7303

Amount of Each Disbursement this Period

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional).....

55.00

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

L PAC

Full Name (Last, First, Middle Initial)

A. BANK OF AMERICA

Mailing Address 700 13TH STREET, NW

City	State	Zip Code
WASHINGTON	DC	20005

Purpose of Disbursement
Bank fee - IE Only Account

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	19	/	2014

Transaction ID : SB29.7304

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. BANK OF AMERICA

Mailing Address 700 13TH STREET, NW

City	State	Zip Code
WASHINGTON	DC	20005

Purpose of Disbursement
Bank Fee - IE Only Account

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	25	/	2014

Transaction ID : SB29.7305

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

C. Civitas Public Affairs

Mailing Address 601 13th Street, NW

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement
Strategic Consulting Fee - IE Only Account

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01	/	29	/	2014

Transaction ID : SB29.7306

Amount of Each Disbursement this Period

10000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

10035.00

--

	21b		22		23		24		25		26
	27		28a		28b		28c		X 29		30b

L PAC

A. Civitas Public Affairs

Date of Disbursement



Transaction ID : SB29.7307

Amount of Each Disbursement this Period

Percentage of students who did not pass the exam
32.22

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle)

B. Civitas Public Affairs

Date of Disbursement

M M / D D / Y Y Y Y
02 12 2014

Transaction ID : SB29.7308

Amount of Each Disbursement this Period

20000.00

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle)
C. Civitas Public Affairs

Date of Disbursement

M M / D D / Y Y Y Y

03 03 2014

Transaction ID : SB29.7310

Amount of Each Disbursement this Period

20000.00

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

40032.22

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

L PAC

Full Name (Last, First, Middle Initial)

A. Civitas Public Affairs

Mailing Address 601 13th Street, NW

City
WashingtonState
DCZip Code
20005Purpose of Disbursement
Travel Expense - IE Only Account

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	03	/	2014

Transaction ID : SB29.7311

Amount of Each Disbursement this Period

198.08

Full Name (Last, First, Middle Initial)

B. Civitas Public Affairs

Mailing Address 601 13th Street, NW

City
WashingtonState
DCZip Code
20005Purpose of Disbursement
Travel Expense - IE Only Account

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	19	/	2014

Transaction ID : SB29.7312

Amount of Each Disbursement this Period

650.62

Full Name (Last, First, Middle Initial)

C. Fenway Community Health Center

Mailing Address 1340 Boylston St

City
BostonState
MAZip Code
02215Purpose of Disbursement
Contribution - IE Only Account

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	24	/	2014

Transaction ID : SB29.7320

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3348.70

--

	21b		22		23		24		25		26
	27		28a		28b		28c		X 29		30b

L PAC

A. Maria L Galdo

Mailing Address 7002 Cold Spring La

City	State	Zip Code
Alexandria	VA	22306

Purpose of Disbursement
Accounting Services- IE Only Account

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB29.7313

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Peak Creative

Mailing Address 1800 Boulder Street
Suite 200

City	State	Zip Code
Denver	CO	80211

Purpose of Disbursement
Publishing & Printing - IE Only Account

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

03 / 24 / 2014

Transaction ID : SB29.7314

Amount of Each Disbursement this Period

451.25

Full Name (Last, First, Middle Initial)

C. Salsa Labs

Mailing Address PO Box 674533

City	State	Zip Code
Detroit	MI	48267

Purpose of Disbursement
Web - IE Only Account

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y
01 29 2014

Transaction ID : SB29.7315

Amount of Each Disbursement this Period

850.00

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

2301.25

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

L PAC

Full Name (Last, First, Middle Initial)

A. Salsa Labs

Mailing Address PO Box 674533

City	State	Zip Code
Detroit	MI	48267

Purpose of Disbursement
Web - IE Only Account

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2014

Transaction ID : SB29.7316

Amount of Each Disbursement this Period

1700.00

Full Name (Last, First, Middle Initial)

B. Start Somewhere, LLC

Mailing Address 320 Capp Street

City	State	Zip Code
San Francisco	CA	94110

Purpose of Disbursement
Fundraiser, Recruitment Consulting - IE Only Account

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	18	/	2014

Transaction ID : SB29.7321

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6700.00

71197.34
